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3/14/2016

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THOMAS G. BRUTON
CLERK, U.S. DISTRICT COURT

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

RECEIVED

MAR 10 2016 EAG
3-10-16

THOMAS G. BRUTON
CLERK, U.S. DISTRICT COURT

Centrell Gee

(Enter above the full name
of the plaintiff or plaintiffs in
this action)

vs.

Tom Dart

16-cv-3061

Judge Amy J. St. Eve

Magistrate Judge Sheila Finnegan

PC6

(Enter above the full name of ALL
defendants in this action. Do not
use "et al.")

CHECK ONE ONLY:

☒

COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983
U.S. Code (state, county, or municipal defendants)

☐

COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE
28 SECTION 1331 U.S. Code (federal defendants)

☐

OTHER (cite statute, if known)

**BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR
FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.**

I. Plaintiff(s):

- A. Name: Centrell Gree
- B. List all aliases: N/A
- C. Prisoner identification number: 20141123050
- D. Place of present confinement: Cook county Jail
- E. Address: P.O. Box 089002 Chicago IL 60608

(If there is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. number, place of confinement, and current address according to the above format on a separate sheet of paper.)

II. Defendant(s):

(In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.)

- A. Defendant: Tom Dart
- Title: Head Sheriff
- Place of Employment: Cook county Jail
- B. Defendant: _____
- Title: _____
- Place of Employment: _____
- C. Defendant: _____
- Title: _____
- Place of Employment: _____

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

III. List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court in the United States:

- A. Name of case and docket number: N/A
- B. Approximate date of filing lawsuit: _____
- C. List all plaintiffs (if you had co-plaintiffs), including any aliases: N/A
- D. List all defendants: N/A
- E. Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): _____
- F. Name of judge to whom case was assigned: N/A
- G. Basic claim made: N/A
- H. Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): N/A
- I. Approximate date of disposition: N/A

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

Hello my name is Centrell Gree and I was housed in Division 1-A2 from November 24th of 2014 to March of 2015. I was exposed to unhealthy extremes. There were mice running threw the unit of Division 1-A2 which were crawling threw my property eating my food. Running across the Bar's in the Day and night. There was no hot water, and there was mold in the shower of Division 1-A2. Some of the window's had holes in them so there was ice build up on the inside of the window. The unit was over crowded. and there was grass like mold growing from the walls on Division 1-A2 also in the tunnel and hallways. Also in Division 1-A2 the

toilet leaked water so it made it a
 spot for the mice & drink water
 an use the Bath Room in my cell.
 All of these violation are a violation
 of my constitutional Right's Being in
 fact my 5th 8th 14th amendment, and
 Division IAA was inspected By D.O.J
 and the fire Department and labled
 unsafe and unhealthy, and did not
 meet the city codes and condemn
 By city Inspector's only & be opened
 Back up By Tom Dart and nothing
 has been fix.

V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

I would like the court to hold Tom Dart responsible for violating my constitutional rights and that I be compensated

VI. The plaintiff demands that the case be tried by a jury.



YES



NO

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this Feb day of 26, 2016

Centrell Cree

(Signature of plaintiff or plaintiffs)

Centrell Cree

(Print name)

20141123050

(I.D. Number)

P.O. BOX 059002

chicago IL 60608

(Address)

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20141123050
Po Box 084002
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Chicago IL 60604